

Fill in this information to identify the case:

Debtor name Van Scoit AM Restaurants LLC

United States Bankruptcy Court for the:

Northern District of Texas

Case number (if known): 25-40643

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year		Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2025</u> to _____ MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	<u>\$94,878.33</u>
For prior year:	From <u>01/01/2024</u> to <u>12/31/2024</u> MM/ DD/ YYYY MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	<u>\$2,506,432.38</u>
For the year before that:	From <u>01/01/2023</u> to <u>12/31/2023</u> MM/ DD/ YYYY MM/ DD/ YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	<u>\$2,552,723.72</u>

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

		Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2025</u> to _____ MM/ DD/ YYYY		
For prior year:	From <u>01/01/2024</u> to <u>12/31/2024</u> MM/ DD/ YYYY MM/ DD/ YYYY		
For the year before that:	From <u>01/01/2023</u> to <u>12/31/2023</u> MM/ DD/ YYYY MM/ DD/ YYYY		

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Rapid Finance Creditor's name 4500 East West Highway 6th Floor Street Bethesda, MD 20814 City State ZIP Code		\$28,461.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>MCA</u>
3.2. Newtek Creditor's name 212 West 35111 Street, 2nd Floor Street New York, NY 10001 City State ZIP Code		\$14,600.00	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. Kapitus Creditor's name 2500 Wilson Boulevard, Suite 350 Street Arlington, VA 22201 City State ZIP Code		\$6,888.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>MCA</u>
3.4. NCR Voyix Corporation Creditor's name 864 Spring St. NW Street Atlanta, GA 30308-1007 City State ZIP Code		\$9,865.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.5. See Attached Creditor's name Street City State ZIP Code		See Attached	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. Insiders include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
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4.1.

Creditor's name	_____	_____	_____
Street	_____	_____	_____
City	State	ZIP Code	
Relationship to debtor			

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Description of the property	Date	Value of property
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5.1.

Creditor's name	_____	_____	_____
Street	_____		
City	State	ZIP Code	

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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6.1.

Creditor's name	_____	_____	_____
Street	XXXX- _____		
City	State	ZIP Code	

Name _____

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

7.1.	Case title	Nature of case	Court or agency's name and address	Status of case
	_____	_____	Name _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Case number		Street _____ _____	
			City _____	State _____ ZIP Code _____

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

8.1. Custodian's name and address	Description of the property	Value
Custodian's name		
Street	Case title	Court name and address
City	Name	Street
State	Case number	City
ZIP Code		State ZIP Code
	Date of order or assignment	

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

9.1.	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
	Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____		
	Recipient's relationship to debtor			

Name

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.** None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>			

10.1. _____

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

 None

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
DeMarco Mitchell, PLLC	Attorney's Fee	2/8/2025	\$6,000.00
Address			
12770 Coit Road, Suite 850			
Street			
Dallas, TX 75251			
City	State	ZIP Code	
Email or website address			
robert@demarcomitchell.com			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

 None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

 None

13.1. Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
<hr/>			

Address

Street

City State ZIP Code

Relationship to debtor**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

 Does not apply

Address	Dates of occupancy
14.1. Street	From _____ To _____

City State ZIP Code

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.

Name

Facility name and address**Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.1.

Facility name _____

Street _____

City _____ State _____ ZIP Code _____

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____**How are records kept?**

Check all that apply:

 Electronically Paper**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?** No. Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

 No Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?** No. Go to Part 10. Yes. Does the debtor serve as plan administrator? No. Go to Part 10. Yes. Fill in below:**Name of plan****Employer identification number of the plan**

EIN: _____

Has the plan been terminated?

 No Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

 None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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18.1

Name _____

XXXX- _____

 Checking Savings Money market Brokerage Other

Street _____

City _____

State _____ ZIP Code _____

Name

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

 None

19.1	Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name _____	_____ _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
	Street _____ _____ _____	Address _____ _____ _____	_____ _____ _____	
	City _____ State _____ ZIP Code _____ _____ _____	_____ _____ _____	_____ _____ _____	

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

 None

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Public Storage Name _____ 8850 Trinity Blvd. Street _____ _____ Hurst, TX 76053 City _____ State _____ ZIP Code _____ _____ _____	_____ _____ _____ Address _____ _____ _____	Misc. Rest. Equipment _____ _____ _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

 None

Owner's name and address	Location of the property	Description of the property	Value
Name _____ _____ Street _____ _____ _____ City _____ State _____ ZIP Code _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Name

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name Street City State ZIP Code		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name Street City State ZIP Code	Name Street City State ZIP Code		

24. Has the debtor notified any governmental unit of any release of hazardous material?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name Street City State ZIP Code	Name Street City State ZIP Code		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name and address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

25.1.

Name _____

Street _____

City _____ State _____ ZIP Code _____

EIN: _____

Dates business existed

From _____ To _____

26. Books, records, and financial statements

- 26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

 None**Name and address****Dates of service**26a.1. **Denke & Denke CPA**

Name _____

From 2011 _____ To _____**5600 Clearfork Main St**

Street _____

Fort Worth, TX 76109

City _____ State _____ ZIP Code _____

- 26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

 None**Name and address****Dates of service**

26b.1.

Name _____

From _____ To _____

Street _____

City _____ State _____ ZIP Code _____

- 26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

 None**Name and address****If any books of account and records are unavailable, explain why**

26c.1.

Denke & Denke CPA

Name _____

_____**5600 Clearfork Main St**

Street _____

Fort Worth, TX 76109

City _____ State _____ ZIP Code _____

Name and address**If any books of account and records are unavailable, explain why**

26c.2.

Julio C. Van Scoit

Name

8820 Trinity Vista Trl

Street

76053

City

State

ZIP Code

- 26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None**Name and address**

26d.1.

Name

Street

City

State

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

 No Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory

Name and address of the person who has possession of inventory records

27.1.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Julio C. Van Scoit	8820 Trinity Vista Trl Hurst, TX 76053	Managing Member,	49.00%
Valerie D. Van Scoit	8820 Trinity Vista Trl Hurst, TX 76053	Member,	51.00%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

 No Yes. Identify below.

Debtor **Van Scoit AM Restaurants LLC**
Name
Position or relationship to debtor **Managing Member**

Case number (if known) **25-40643**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No
 Yes

9:33 AM
03/11/25
Cash Basis

Van Scoit AM Restaurants LLC
Expenses by Vendor Summary
December 2024 through February 2025

Cash Basis	Dec 2024 - Feb 2025
6237 Rufe Snow LLC	13,000.00
AD Pages	0.00
ATMOS	1,169.90
Ben E. Keith	83,842.77
City of Watauga	0.00
Coca-Cola North America	0.00
Decision Logic	768.26
Direct Source Hamco	14.87
Delancey Street	6,000.00
DoorDash	
First Data	3,930.76
Freedom Pay	131.54
Fox Funding Group	68,000.00
GIVEX	43.45
HME	0.00
Massey	1,311.14
North Mill Equipment	2,845.60
NCR CORPORATION	1,245.60
Newtek Bank	0.00
NuArx Inc.	0.00
NuCO2	0.00
Olo Inc	1,408.37
Parkside Center LLC	12,000.00
PNC Bank	3,611.50
Rapid Finance	39,846.10
Raven Electrical	0.00
Reliant Metro LLC	361.75
SCCS	0.00
Schlotzsky's	3,036.63
Schlotzsky's-NAMF	11,681.33
Schlotzsky's-Royalty	17,132.00
Shreeji3801 Inc.	0.00
Spectrum	1,515.89
Summer Energy	8,697.52
TCR Heating and Air	0.00
Trimble Grease Trap	0.00
Westbrooke Capital Ltd.	0.00
UberEats	0.00
TOTAL	<u>268,594.98</u>